DSHW-006B-1 Rev. 2/06 **Part 1**

SOLID WASTE TRANSPORTER MONTHLY DISPOSAL REPORT (Only for Waste Hauled Directly Out-of-State)

| eport Submitted By: | Phone #: | | |
|---|----------------|---|------------------------|
| | | Reporting Month | Year |
| | МО | NTHLY SUMMARY | |
| NOTE The filing of this report is required by the New Jersey | WASTE TYPES | Solids | TOTAL AMOUNT (IN TONS) |
| Solid Waste Regulation AC 7:26- 3.5(f). Failure | 10: | Household & Municipal | |
| submit this report on a nthly basis may result in | 13: | Bulky Waste | |
| mposition of a penalty NJSA 13:1E-9 et seq. nd /or revocation of | 13C: | Construction & Demolition | |
| license. | 23: | Vegetative Waste | |
| omplete monthly report sisists of one page each | 25: | Animal & Food Processing | |
| Form DSHW-006B-1 and 2. (Part 1 and Part 2) | 27: | Dry Industrial | |
| Iditional Part 2 forms t be filed for each final | 27A: | Asbestos | |
| sposal facility and/or nty of waste origin to ch out-of-state waste is | 27I: | Incinerator Ash | |
| transferred. | OTHER | Identify: | |
| issues the submitted to the interest below) the County of Origin the waste within 20 after the last day of a month. | | TOTAL DISPOSED DIRECTLY OUT-OF-STATE (From Part 2): | |

NJ Department of Environmental Protection
Division of Solid and Hazardous Waste
Bureau of Recycling and Planning
P.O. Box 414
Trenton, NJ 08625
Attention: Carol Puca (609) 984-3438

County of Origin of Waste
Attention: Solid Waste Coordinator
Note: The address for each county SW
coordinator is available on the DSHW
/Recycle Web page or by calling your
local county office.